

# ANALYST WORKSHEET

## **BENEFIT COMPARISON BROCHURE & BHP MODEL PLAN CONTRACT**

Carrier: \_\_\_\_\_  
 Brochure Form Number: \_\_\_\_\_  
 Date(s) of Review: \_\_\_\_\_

Prior Brochure: \_\_\_\_\_  
 Reel \_\_\_\_\_ Frame \_\_\_\_\_

### GENERAL REVIEW REQUIREMENTS

**Authority to Review Brochure – RCW 48.44.023 and RCW 48.46.066**

Topic	Subtopic	Reference	Specific Issue	Complies Y N		
Comparison Brochure	<i>Disclosure</i>	RCW 48.44.023 RCW 48.46.066	1. A health care services contractor or a health maintenance organization offering any health benefit plan to a small employer shall offer and actively market to a small employer a health plan providing benefits identical to the 2001 basic health plan (non-subsidized).  2. A carrier offering a health benefit plan that does not include benefits in the basic health plan shall clearly disclose the difference in a brochure. Does the brochure comply?	<input type="checkbox"/>	<input type="checkbox"/>	Contract Pg _____ Comments:
				<input type="checkbox"/>	<input type="checkbox"/>	
	<i>Definitions</i>	RCW 48.43.005(3) RCW 70.47.060 <a href="#">BHP 2001 Brochure</a>	1. Basic health plan model plan means a health plan as required in RCW 70.47.060(2) 2. A basic health plan model plan provides coverage identical to the basic health plan as configured 01/01/2001. 3. The basic health plan model plan is to be configured per the BHP 2001 Brochure 4. Are the benefits in the comparison similar to the BHP 2001 plan?	<input type="checkbox"/>	<input type="checkbox"/>	Contract Pg _____ Comments:
				<input type="checkbox"/>	<input type="checkbox"/>	
	<i>Prior Approval</i>	RCW 48.44.023 RCW 48.46.066 WAC 284-43-920	1. The comparison brochure is prior approval and must be filed prior to use and refilled within 30 days after the end of an eighteen-month period. a. Is the carrier compliant?	<input type="checkbox"/>	<input type="checkbox"/>	Contract Pg _____ Comments:
General Format Of Brochure	<i>Single Page</i>	RCW 48.44.023 RCW 48.46.066 RCW 48.43.510(1)	1. The brochure must list all small products the carrier offers along side the BHP model plan in a matrix or grid format. 2. Does the brochure allow easy comparison of products without multiple pages? a. Brochure can be in tri-fold or newspaper sized page format.	<input type="checkbox"/>	<input type="checkbox"/>	Contract Pg _____ Comments:
				<input type="checkbox"/>	<input type="checkbox"/>	
	<i>Additional Features</i>	RCW 48.44.023 RCW 48.46.066	The carrier may choose to add features that allow the comparison brochure to for use in marketing. Do the general marketing features interfere with the clarity of the basic comparison?	<input type="checkbox"/>	<input type="checkbox"/>	Contract Pg _____ Comments:

	<i>Clarity</i>	RCW 48.44.023 RCW 48.46.066	1. Benefits and features must be clearly defined and simply referenced. a. Carrier may not use text references such as: “see above” or “see rider” to meet minimum requirement?			Contract Pg _____ Comments:
Core Model Plan Benefits Provided	<i>Alternative Care Services</i>	RCW 48.43.055 WAC 284-43-205	Does brochure indicate that chiropractic care, acupuncture, massage therapy and other complementary care is a covered benefit under its small group plans?			Contract Pg _____ Comments:
	<i>Ambulance Services</i>	RCW 48.44.023 RCW 48.46.066	Is the \$75 copayment listed under the BHP model plan?			Contract Pg _____ Comments:
	<i>Chemical Dependency</i>	RCW 48.44.023 RCW 48.46.066 HIPAA	If a lifetime maximum is listed for Chemical Dependency (BHP is \$10,000), is it clear that the lifetime maximum applies to coverage under the current carrier and not aggregate of all carriers as stipulated by HIPAA?			Contract Pg _____ Comments:
	<i>Emergency and Nonemergent Outpatient Care</i>	RCW 48.44.023 RCW 48.46.066	1. Does the BHP model plan have a \$75 per nonemergency outpatient admission; no copayment for readmission for same condition within 90 days? 2. Is the \$75 copayment per emergency, waived if admitted as defined by the BHP plan?			Contract Pg _____ Comments:
	<i>Hospice Services</i>	RCW 48.44.320 WAC 284-44-500 WAC 284-46-500	Does comparison brochure list small group plans as offering a minimum of 6-months coverage for Hospice care?			Contract Pg _____ Comments:
	<i>Home Health Care</i>	RCW 48.44.320 WAC 284-44-500 WAC 284-46-500	Does comparison brochure list small group plans as offering a minimum of 130 visits for Home Health Care?			Contract Pg _____ Comments:
	<i>Hospitalization</i>	RCW 48.44.023 RCW 48.46.066	Does brochure indicate inpatient care under BHP subject to: Age 18 and under: \$100 per day copayment to \$500 annual max; over age 18: \$200 per day copayment to \$1,000 annual?			Contract Pg _____ Comments:
	<i>Lab and X-ray</i>	RCW 48.44.023 RCW 48.46.066	Does brochure indicate there is no copayment for BHP Lab and X-Ray?			Contract Pg _____ Comments:
	<i>Maternity Care</i>	RCW 48.44.023 RCW 48.46.066	Does brochure indicate that maternity care is subject to facility copayment only under the BHP plan? That maternity is not subject to office copayment?			Contract Pg _____ Comments:
	<i>Medical &amp; Surgical Care</i>	RCW 48.44.023 RCW 48.46.066	Does brochure indicate the coverage for Medical and Surgical care?			Contract Pg _____ Comments:
	<i>Mental Health Services</i>	RCW 48.44.023 RCW 48.46.066	Does brochure reflect the BHP mental health benefit of 10 days inpatient per calendar year; 12 visits for outpatient care?			Contract Pg _____ Comments:

	<i>Organ Transplants</i>	RCW 48.44.023 RCW 48.46.066	Does brochure list 12-month wait for organ transplants? That the wait does not apply to the BHP if condition is not considered preexisting?			Contract Pg _____ Comments:
	<i>Physician Services</i>	RCW 48.44.023 RCW 48.46.066	Does the brochure list the following copays for BHP office visits: Age 18 and under: \$10 for office or home visit; Over age 18: \$18 per office or home visit?			Contract Pg _____ Comments:
	<i>Prescription Drugs</i>	RCW 48.44.023 RCW 48.46.066	Does comparison brochure list the BHP copayments of \$3/\$15/50%? Is Insulin considered tier 1?			Contract Pg _____ Comments:
	<i>Preventive Care</i>	RCW 48.44.023 RCW 48.46.066	The BHP does not have a copayment for Preventive care. Is this reflected in the comparison?			Contract Pg _____ Comments:
	<i>Skilled Nursing Facilities</i>	RCW 48.44.023 RCW 48.46.066 WAC 284-44-500 WAC 284-46-500	The BHP allows skill nursing as an alternative to hospitalization. Is this benefit listed on the comparison?			Contract Pg _____ Comments:
Allowable BHP Exclusions	<i>Vision Care</i>	RCW 48.44.023 RCW 48.46.066	Is clearly stated that vision exams and glasses are not covered by the BHP? Are small group vision benefits listed?			Contract Pg _____ Comments:
	<i>Speech, Occupational, Neurodevelopmental therapy and Physical Therapy</i>	RCW 48.44.023 RCW 48.46.066	1. Is it clear that these services are excluded by the BHP? 2. Is it clear that these services are covered under the small group plans?			Contract Pg _____ Comments:
	<i>Medical Equipment</i>	RCW 48.44.023 RCW 48.46.066	Is it clear that the BHP excludes Medical equipment and supplies not specifically listed (including but not limited to hospital beds, wheelchairs, walk aids, respiratory equipment, and oxygen) except while patient is in the hospital or prior approved? Is it clear that the small group plans cover this benefit?			Contract Pg _____ Comments:
Compliance	<i>Legal Compliance</i>	RCW 48.44.023 RCW 48.46.066	Does any statement in the brochure establish or add benefit conditions that are not in compliance with the law or underlying contract?			Contract Pg _____ Comments:
	<i>Advertising Compliance</i>	RCW 48.44.023 RCW 48.46.066 RCW 48.43.510(1)	Are the minimum BHP benefits advertised accurately in relation with the Carrier's offering?			Contract Pg _____ Comments:
	<i>Service Area</i>	RCW 48.43.035	Does the carrier offer all of its health plans across its entire service area?			Contract Pg _____ Comments: